

Batter should not swing at 1st pitch. Must not hit with runner on 1st for fear of double play.

3. Runner on 2nd. No outs or 1 out no score, or score tied or own team ahead. Several possibilities, generally wait until pitcher has ~~to~~ put one over. (A) Bunt slow roller toward 3rd, drawing 3rd baseman in to field ball and leaving base uncovered. Only good bunters attempt this.

(B) Pick good ball and hit to rt. fielder.

4. Runner on 3rd, no outs or 1 out no score, score tied or own team ahead.

(A) Wait for good one & hit hard.

(B) For "suicide squeeze" the base - runner should dash for home as ball leaves pitcher's hand. Ball must be bunted away from any fielder. Signal should be seen by both batter & runner. Crouch at 1st in good position to give signal — perhaps rubbing the hands & getting. If play is detected the runner is called out. In safety squeeze, runner waits until ball has been bunted. Requires a perfect bunt.

5. Runner on 2nd, 2 outs, no score, score tied or own team ahead. Try for hit driven directly over 1st or 3rd. If stronger batter following consider a walk.

6. Runner on 3rd. 2 out, no score, score tied or own team ahead. Use suicide squeeze.

JUNIORS

BASEBALL

SEPTEMBER 1940

I. a. What is a fair hit?

- b. What is the effect on the team at bat when a fair hit is
1. not caught on the fly.
 2. is caught on the fly.
 3. an infield fly.

✓ II. Give six instances in which the batter is out.

III. a. Give three instances when the batter is awarded a base.

b. Give four instances when the baserunner is awarded one base without liability of being put out.

c. When may the baserunner advance any number of bases with liability of being put out. (Four instances).

IV. What are the following:

- a. Block ball
- b. Fly ball
- c. Force-out.
- d. Passed-ball.

7. Runners on 2nd or 3rd. No out, 1 out, try for hit to right field; weak would fill bases making double and possible.

8. Runners on 1st + 3rd. No outs or 1 out wait for runner to steal to 2nd. Try for long hit to r. field.

9. As in no. 8 2 outs wait for steal to 2nd then suicide squeeze or long hit to r. field.

Base running strategy.

If hit is good for two bases circle out so you can run directly from 1st to 2nd. Be sure to touch each base.

With two outs and base runner on base if batter hits long fly runner should start for next base. If missed so much the better. If caught 3rd is out anyway. Stealing is not a problem unless catcher is expert. Runners on 1st + 2nd should start for next base as soon as ball is pitched. Rarely steal home. With 2 out and weak batter steal to home can be made when ball leaves catcher's hand.

11. Team at field, should cover territory into which ball may be batted placed there by pitcher.

Pitcher must be able to place balls.

Must assist with put-outs at 1st base, covering base ~~at 1st~~ herself when ball is batted to 1st baseman. Cover home plate in case of wild pitch. Catcher is master strategist. Director of pitcher and of team. In-fielders should play deep. All players should think next play out before it is made. When ball is hit to 2nd baseman short stop or short fielder covers 2nd. When ball is hit to 3rd baseman who is playing deep pitcher or short stop covers.

Backing up throws & bases is always done by expert players.

Runner on 3rd base. Batter hits to short stop, pitcher or catcher. Short stop holds up play until it is too late until it is too late for 3rd runner to score and then throws to 1st.

Possibility for backing plays

1. Runner on 2nd, 1st out bunted ball hit along 1st baseline $\frac{2}{3}$ of way to base. Pitcher should field it tossing to 1st base, 1st baseman throws across diamond to 3rd who is back up by left fielder coming in.

2. Runner on 1st, one out fly ball hit to center field. Center fielder throws to 1st base, runner has held 353 base & starts for 2nd at time of catch. 3rd baseman covers 2nd base. 5th stop backing up play.

3. Same as 2 but with runner on 2nd base. Catcher should not back up throw to 1st unless pitcher covers home.

4. Runner on 2nd 1 out, bunted ball hit along baseline

Possibility for backing up plays.
Runner on 1st, 1 out

Technique of bunting is generally given little attention by coaches & players. Every player should be able to bunt, as a surprise offensive. But when it is necessary to run a base-runner into a scoring position.

Stance in Batter's box, grip of the bat & back swing should not be altered in bunting. Bunting must be disguised as long as possible.

R. hand slides to a point $\frac{1}{2}$ way up bat and L. is placed $\frac{1}{2}$ or 3 ins. from it. R. hand hit bunt is valueless.

The weight is transferred to forward foot in "stride" stance is used. More advanced batters will make transfer by taking short step with L. foot.

As the ball approaches home plate bat is placed 11 to ground 354

A ball is hit just ahead of home plate & is placed forward & downward with extension of arms.

The direction of bunt is important it should be so placed that the chances of ~~being~~ forcing the runner at 2nd is

2 factors effect the placement.
1st is the position of ball bat as ball is met.

2nd is the type of pitch is bunted in.

Other methods differ chiefly with position of hands on bat.

Some players prefer to shorten the grip of L. hand only 2" or 3" while R. slides $\frac{1}{2}$ way up bat.

Placing hands near upper & lower extremities. The ball is then met between the hands with hitting portion of bat, not accurate.

The hands "choke" the bat & the head of bat is raised. The ball is hit with a sharp downward motion that imparts a high bound. This is difficult to field quickly.

The bunt is best presented in actual play. The explan. may be accompanied by a demonstration. Squad organ. is useful. Various lead-up games may be included in program to stimulate int.

of group
No. 1 Pepper ball. Rules are modified slightly. Player batting

is reg'd to count.

2. Bunt Ball. Group divides into teams of 6-12 players. Each team lined up as follows:

$$\begin{array}{ccccccc} X_9 & X_8 & X_7 & \boxed{X_3} & X_6 & X_5 & X_4 \\ & & X_1 & & & & \end{array}$$

A.

X_2

B.

X_1 bunts ball sent to her by pitcher X_3 . She need not bunt bad balls. The batter attempts to bunt alternate to group A + group B. The batter is allowed 5 bunts; 1 point is scored for each successful trial. Players rotate after batter has completed her term at bat.

3. Beat Ball. 2 teams of 7 are utilized 1 goes in field other in bat. The batter places bunt so she may reach 1st base, 1 point is scored when player reaches 1st when all players at bat have turn.

Reasons for in-field fly.

If before 2 are out, while 1st + 2nd or 1st + 2nd + 3rd are occupied the batter hits a ball

that lands within or near the
baseline the batter is out.

It does not have to be
caught but has to be in base lines
or near enough so in - fielder
could move closer & pick it up with ease.

The 1, farthest from home is out.
If there is 1 out & there are base
runners on 1st & 2nd situation is
the same.

Abdominal Exercises.

Formation:

Circle- Hands on each others shoulders.

1. Knee lifting and twisting across body, return to open position and lower - first right and then left.

Commands:

Arms lower- long sitting position change - distance take (with legs out-stretched), legs together place - Back lying change.

2. Arm out to side. Leg circling followed by knee bending, stretching and lowering to counts of 8.
3. Knee bending and double knee twistind to touch left arm, return to position - stretch and lower slowly to count of 8. Repeat to other side.

Commands:

Arms to side and long sitting change. By swinging legs to the right - crouch squat position change.

4. Alternate leg stretching sideways and backwards, beginning with the right / - now. Note:- 1st time without a jump changing to other foot and add jump for 2nd time. Alternate thereafter for 8 counts (and times) all together.

First Aid Course

Chapter 1.

Need of First aid, Methods of administering, Principles.
Necessary Qualifications--: Observance, Tact, Resourcefulness,
Dexterity, Explicit, Discrimination, Perseverance, Sympathy
Essentials Position, Signs and Symptoms History, (signs conditions
noted by first aider such as swelling pallor etc. Symptoms are sensations
of patient such as swelling pain, giddiness, etc. History story of accident)
Cause, Surrounding, (remove dangers, diagnosis, find help, appliances
available, shelter and means of transport).

Chapter 2.

Principles. 1. Death is not to be assumed because signs of life are absent.
2. Remove cause 3. Haemorrhage checked immediately 4. Air 5. Hardth
6. Rest 7. Cover broken skin 8. When a bone is broken no attempt must be
made to move the patient until the bone has been rendered as immovable as
practicable, unless life is in danger from some other cause 9. Poisonous
10. Transport arranged 11. Removal of clothing 12. Stimulate 13. Do
not consider yourself a doctor.

Chapter 3.

Structure of the Body.
Use of the skeleton. 1. Support, shape and firmness to body. 2. Muscle
attachment. 3. Protect organs.
Approximate the following: Skull, Bones of head, Lower Jaw, Vertebral
Column (spine), Ribs, Shoulder blade, Collar-bone, arm bone, Forearm,
hand, Pelvis, Thigh, Knee Cap, Leg bones, Foot.
Joints Where two bones meet and are held together by muscle.
Knee Ball-and-Socket. Round head fits into cup free movement (hip and shoulder)
Hinge, bones are rounded to fit each other. Ankle and knee.
Tissues. Muscle, voluntary and involuntary, (arm and leg muscles and
digestive muscles respectively) Connective tissue, elastic and joining
parts. Skin.
Trunk contents. Chest (Heart and lungs).
Abdomen: stomach, liver, spleen, intestines, pancreas, kidneys, bladder.

Chapter 3.

Shock. It must always be treated first.
Increased by the following--: 1. loss of blood. 2. Exposure to cold air
3. Severe pain. Mental anxiety.
Treatment--: 1. arrest haemorrhage. 2. Lay patient down. 3. Loosen clothing.
4. Prevent aggravation of injuries. 5. Cover. 6. Raise lower limbs.
7. Swelling etc. 8. be encouraging. 9. do not excite or worry. 10. do
not discuss condition with patient or in hearing. 11. take to shelter
On arriving at shelter--: 1. Wrap the patient in blankets. 2. Give
hot stimulant if patient can swallow (not alcohol.) 3. Examine for injuries

Chapter 5.

Dressings. 1. Dry. 2. Wet. (cold and hot compresses)
Bandages use the triangular bandage from which you make the following
The broad, narrow, using the reef knot.
Slings--: Large arm sling. Small arm sling, St. John Slings. Hip, ankle,
head, back, chest, neck, shoulder, elbow, knee.

Chapter 6.

Fractures
Causes: direct violence, indirect violence, muscular actions.
Kinds. Simple, compound complicated, impacted.
Signs Pain loss of Power, Swelling, Deformity, Irregularity, Unnatural
Mobility, Grating sound